

B6 Declaration (Official Form 6 - Declaration) (12/07)

IN RE O'Reilly, Christopher L & O'Reilly, Tami

Debtor(s)

Case No. 07-30006

(If known)

**AMENDED DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 5 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: May 17, 2009

Signature: [Signature]

**Christopher L O'Reilly**

Debtor

Date: May 17, 2009

Signature: [Signature]

**Tami O'Reilly**

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.*

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

(Print or type name of individual signing on behalf of debtor)

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

*Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.*

IN RE O'Reilly, Christopher L & O'Reilly, Tami

Case No. 07-30006

Debtor(s)

(If known)

### AMENDED SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>786.82</u>
a. Are real estate taxes included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
b. Is property insurance included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
2. Utilities:		
a. Electricity and heating fuel	\$	<u>170.00</u>
b. Water and sewer	\$	<u>20.00</u>
c. Telephone	\$	<u>120.00</u>
d. Other <u>Wood Stove Materials</u>	\$	<u>60.00</u>
<u>Cable/Internet</u>	\$	<u>120.00</u>
3. Home maintenance (repairs and upkeep)	\$	
4. Food	\$	<u>500.00</u>
5. Clothing	\$	<u>89.00</u>
6. Laundry and dry cleaning	\$	
7. Medical and dental expenses	\$	<u>100.00</u>
8. Transportation (not including car payments)	\$	<u>313.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>100.00</u>
10. Charitable contributions	\$	
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	
b. Life	\$	
c. Health	\$	<u>10.00</u>
d. Auto	\$	<u>50.00</u>
e. Other	\$	
12. Taxes (not deducted from wages or included in home mortgage payments)	\$	
(Specify)	\$	
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	
b. Other	\$	
14. Alimony, maintenance, and support paid to others	\$	
15. Payments for support of additional dependents not living at your home	\$	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
17. Other <u>Household Cleaing Supplies</u>	\$	<u>33.00</u>
<u>Personal Care Services &amp; Products</u>	\$	<u>41.00</u>

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.

\$ 2,512.82

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

No longer have insurance so prescription costs have increased, and are trying to keep medical costs at an absolute minimum.

Debtors are paying for Child Health Plus for son only at the above shown \$10/mo.

Debtors themselves are no longer covered by insurance and thus doctor & regular prescriptions (which they are on) are full paid out of pocket. No COBRA coverage because too expensive.

Mortgage increase shown above begins 5/1/2008

### 20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	<u>2,972.80</u>
b. Average monthly expenses from Line 18 above	\$	<u>2,512.82</u>
c. Monthly net income (a. minus b.)	\$	<u>459.98</u>

Debtor(s)

(If known)

### AMENDED SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S):	AGE(S):
EMPLOYMENT: DEBTOR		SPOUSE
Occupation Name of Employer How long employed Address of Employer		<b>Driver Birnie Bus Service Inc</b>

**INCOME:** (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly)	\$ _____	\$ <b>1,554.79</b>
2. Estimated monthly overtime	\$ _____	\$ _____
<b>3. SUBTOTAL</b>	<b>\$ 0.00</b>	<b>\$ 1,554.79</b>
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and Social Security	\$ _____	\$ <b>276.33</b>
b. Insurance	\$ _____	\$ <b>41.56</b>
c. Union dues	\$ _____	\$ _____
d. Other (specify) <u>See Schedule Attached</u>	\$ _____	\$ <b>113.10</b>
<b>5. SUBTOTAL OF PAYROLL DEDUCTIONS</b>	<b>\$ 0.00</b>	<b>\$ 430.99</b>
<b>6. TOTAL NET MONTHLY TAKE HOME PAY</b>	<b>\$ 0.00</b>	<b>\$ 1,123.80</b>
7. Regular income from operation of business or profession or farm (attach detailed statement)	\$ _____	\$ _____
8. Income from real property	\$ _____	\$ _____
9. Interest and dividends	\$ _____	\$ _____
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$ _____	\$ _____
11. Social Security or other government assistance (Specify) _____	\$ _____	\$ _____
12. Pension or retirement income	\$ _____	\$ _____
13. Other monthly income (Specify) <b>UIB (430/Wk)</b>	\$ <b>1,849.00</b>	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
<b>14. SUBTOTAL OF LINES 7 THROUGH 13</b>	<b>\$ 1,849.00</b>	\$ _____
<b>15. AVERAGE MONTHLY INCOME</b> (Add amounts shown on lines 6 and 14)	<b>\$ 1,849.00</b>	<b>\$ 1,123.80</b>
<b>16. COMBINED AVERAGE MONTHLY INCOME:</b> (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	<b>\$ 2,972.80</b>	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:  
**Debtor is looking for employment. UIB of \$430 per week has been extended to August 2009.**  
**Debtors do not reasonably anticipate increase or decrease in following year.**

Debtor(s)

**AMENDED SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

Continuation Sheet - Page 1 of 1

	DEBTOR	SPOUSE
Other Payroll Deductions:		
SDI		2.60
Union		100.75
Union COPE		9.75

Document Page 5 of 6  
**United States Bankruptcy Court**  
**Northern District of New York**

**IN RE:**Case No. **07-30006****O'Reilly, Christopher L & O'Reilly, Tami**Chapter **13**

Debtor(s)

**AMENDED SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	1	\$ 0.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	1		\$	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			\$ 2,972.80
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 2,512.82
TOTAL		3	\$ 0.00	\$	

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United States Bankruptcy Court  
Northern District of New York

IN RE:

Case No. **07-30006****O'Reilly, Christopher L & O'Reilly, Tami**Chapter **13**

Debtor(s)

**AMENDED STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ <b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ <b>0.00</b>
Student Loan Obligations (from Schedule F)	\$ <b>0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ <b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ <b>0.00</b>
<b>TOTAL</b>	\$

**State the following:**

Average Income (from Schedule I, Line 16)	\$ <b>2,972.80</b>
Average Expenses (from Schedule J, Line 18)	\$ <b>2,512.82</b>
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 )	\$

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$
4. Total from Schedule F	\$
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$

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